	<u></u> κ	AFFIC CRASH	REPORT	OH-1 (Rev. 1-82)										
	Lebanon Po				ice 0830300			OD	HS USE C	ONLY - 00 NC	OT MARK ABOVE		LOCA	
	REPORT TAKEN	AT STATION NO OI PEDE INVOL	STRIANS	H SEVERITY (CHEC	40	'ERE) PERTY DAMAC	SE ONLY	COMBIN VEH/PR LOSS	VED OP	OVER \$150	HIT SKIP	SOLVED	1-	
	IN COUNTY OF WARREN IN KICITY LEBANO					. D			ASH: D	UNDER \$150	TIME: MILIT	<u>I UNSOLVED</u> TARY	15°	
	CRASH OCC	JRRED ON	RSECTION OF					12						
	IF NOT IN IN	558 TERSECTION	COBS TOLDING T, MILEPOST, HOUSE NO. 9 CITY CODE					6						
	MILESFEET											8321		
	LOG-1	LOG-2	FILT	1 1 1		d ga								
	A UNIT	NO OF OCCUPA	ANTS OPERAT	ING PARKED	DRIVER	DRIVERLESS HIT & RUN NON CONTACT INSURANCE CO							<u> </u>	
	DRIVER-PEDESTRIAN NAME (LAST, FIRST, MI) ADDRESS (NO., STREET, CITY, STATE, ZIP CODE) 4/0/0/1 5/0350 (10 1/451/2)													
	PHONE NO.	Lewis,	BIRTH DATE	AGE SEX SO	CIAL SECUR	1061 3 1350 Clasksville OH 45/13 L SECURITY NO. STATE DRIVER'S LICENSE NO. OCCUPA							N .	
LE SECTION	OWNER (IE SAME AS DRIVER WRITE SAME)							OH RM365726						
	OWNER (IF SAME AS DRIVER, WRITE SAME) ADDRESS ADDRESS ADDRESS ADDRESS PHONE PHONE PHONE													
	VEHYR MAKE MODEL 25 COLOR 25				STYLE STATE LICENS			E PLATE NO. TOWING SE						
	CIRCLE DAMAGE	2/1/3	5	DAMAGE SEV		DAMAGE SC	CALE	755		DISPOSITION	FIRE	FROM	то	
黑	AREAS .	10 UNDER CAR						ODERATE PENANTER AT A				NO FIRE	00.40	
- N	=	8 7 6 12 TRAILER DISAF				LING			EAVY REMAINED AT SO TOWED			CENE FIRE DUE TO CRASH		
TRIA	8 UNIT 2 NO OF OCCUPANTS O OPERATING PARKED					RLESS HIT&			OR.	URANCE CO. AGENT		,		
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DRIVER-PEDESTRIAN-VEHICLE	PHONE NO.		CIAL SECURITY NO. ADDRESS			STATE DRIVER'S LICENSE			NO. 00	CCUPATION				
₹IVE	OWNER (IF SA	AME AS DRIVER, WRITE							PHONE					
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	VEH YR MAKE MODEL COLOR			STYLE STATE LICENSE			PLATE NO).	TOWING SER	RVICE	VEH/PED D			
	CIRCLE DAMAGE SEY								VEHICLE DISPOSITION				TO	
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	D. UNIT NO.	ADDRESS		~~~~	m PHONE	D J y	SEX	\ <u></u>	/ 3	a	3 MINOR VIS 4 NO VISIBLE	IBLE E INJURY		
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CCU	FROM UNIT NO.	NAME (LAST, FIRST,	m l				P-PEDESTRIAN			4 APPARENTLY ASLEEP 5 PHYSICAL DEFECT				
Ŏ	ADDRESS					PHONE SEX		RESTRAINTS			8 OTHER CONDITION 7 UNKNOWN			
	A B C INJURED TAKEN TO					у			A B C 0 E F			COHOL	YES	
	A B C INJURED TAKEN TO E					у			I NOT USED 2 NONE AVAILABLE 3 LAP BELT USED) [NO ESTED	
	D E F OFFENSE OHARGED AND DESCRIPTION								3 LAP BELT USED 4 LAP/SHOULDER BELT USED 6 SHOULDER BELT USED 6 CHILD SAFETY SEAT			OL DETECT TY IMPAIRE	ED	
ON	A GRC ORC						7 ÅIR BAG US 8 USE NOT RE			ORTED 3- HBD ABILITY NO 4 HBD ABILITY UNI		TY NOT IMPA	AIRED VN	
ACTION	ORC. OFFENSE OHARGED AND DESCRIPTION ORC. OFFENSE OHARGED AND DESCRIPTION								EJECTION DRUGS A B C D E F A TESTED 0					
POLICE	RECEIVED CAIL 1142 DISPATCHED ARRIVED CLEARED OTHER TIME TOTAL MINUTES 00 OF OF OF OTHER TIME TOTAL MINUTES 00 OTHER TIME TO								I I I I I I I I I I I I I I I I I I I		1 No		YES NO	
PO J	DATE REPORT FILED PHOTOS OFFICER'S NAME BAI					GE NO. CHECKED BY			I NOT EJECTED 2 PARTIAL 3 TOTAL			DETECTED	<u> </u>	
	10 0 14 20 MOTTIS 131 State Ptl-012 2/13/03								4 TRAPPED INSIDE VEHICLE 2 USING PRESCRIBED DRUG 3 USING ILLICIT DRUG					